National Multi-Agency Coordinating Group

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NMAC Correspondence 2016-3

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To: Geographic Area Coordination Group Chairs

From: National Multi-Agency Coordinating Group

Subject: Standard use of the Medical Incident Report

On January 27, 2014 the National Wildfire Coordinating Group (NWCG) released Memorandum M-14-01 (http://www.nwcg.gov/sites/default/files/memos/eb-m-14-01.pdf) announcing the release of the 2014 Incident Response Pocket Guide (IRPG), Publication Management System (PMS) 461. Within that memo a change to previous guidance found in NWCG memo #025-2010, Dutch Creek Serious Accident Investigation Report Response was announced. Now the IRPG and the ICS-206 WF, Medical Plan, use the same Medical Incident Report, commonly referred to as the "9 Line." The intent is standardized use of a common initial report to enhance communication during a medical emergency.

It is NMAC's goal that all Incident Management Teams (IMT) ensure the Medical Incident Report in their Incident Action Plan is the same as the one found in the current version of the IRPG. Use of the ICS-206 WF is one way to meet that goal. Many IMTs are already using this standard Medical Incident Report but it has come to our attention that some are not. Again, the intent is standardized use of a common initial report to enhance communication during a medical emergency. As of December 1, 2015 a total of 386,137 IRPGs had moved through the cache system. Not all firefighters will have an Incident Action Plan but nearly all do have an IRPG. Our firefighters are training using the Medical Incident Report found in the IRPG and in a high stress situation they will likely revert back to that training making it imperative the Communications Unit, Medical Unit, and others are using the same initial report format. Use of the standard reporting format is just as necessary for initial and extended attack incidents, particularly when the fire is being staffed by interagency or off unit resources.

Wildland fire resources, IMTs, and local unit coordination centers are all encouraged to train using the standard Medical Incident Report. Training courses and field use have shown that taking the few moments needed to gather all the information needed in the Medical Incident Report before calling Communications provides a smooth and professional relay of initial information. This training and pre-shift briefings can also provide guidance on what type of injury/illnesses need to be reported over the radio. One Medical Incident Report training resource can be found in the 6 Minutes for Safety program at: http://www.wildfirelessons.net/HigherLogic/System/DownloadDocumentFile.ashx?DocumentFileKey=96bf 042d-60e1-4c9d-b91f-1e22c360c73f&forceDialog=0.

Please communicate and distribute this correspondence widely to ensure use of the standard Medical Incident Report.

/s/ Dan Buckley NMAC Chair













